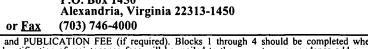
## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450



INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)
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Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

\Kay Harlow,	1 1	(Depositor's name
Koult	alaur	(Signature
December 23	, 2003	(Date

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APPLICATION NO.	FILING	DATE		FIRST NA	MED IN	VENTOR			ATTORNEY I	OOCKET N	0. (	CONFIRMAT	ON NO.
09/976,442	10/12	2/2001		Sun	dar Ama	rtur			LAM2P	253.CIP1		2726	5
TITLE OF INVENTION: REFERENCE	IN-SITU D	ETECTION	OF THIN-ME	TAL INTE	RFACE	USING	OPTICAL	INTE	RFERENCE	VIA A	DYNA	MICALLY	UPDATE
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1. Change of correspondence add CFR 1.363).	lress or indication of "Fee	Address" (37	names of up to	n the patent front page 3 registered patent	attorneys or	Martine	& Penilla,	
☐ Change of correspondence Address form PTO/SB/122) a	address (or Change of Cottached.	rrespondence	firm (having as	natively, (2) the name a member a registered	l attorney or	2		
☐ "Fee Address" indication (c PTO/SB/47; Rev 03-02 or mo	or "Fee Address" Indication or recent) attached. Use of	n form of a Customer		names of up to 2 regis nts. If no name is liste		3		

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

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(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Lam Research Corporation

Fremont, CA

will be printed.

	•	
Please check the appropriate assignee category	y or categories (will not be printed on the patent);	☐ individual X☐ corporation or other private group entity ☐ government
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X□ Issue Fee	X A check in the am	ount of the fee(s) is enclosed.
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Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

(Date) 12=23-03 (Authorized Signature)
Albert S. Penilla (39

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